

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from  
John Doe dba Doe's Limo

Application for new  
Class C - Taxi  
Authority

BEFORE THE  
PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2008-128-T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Romeo Liriani

Address: 511 1/2 Ave N  
Myrtle Beach, SC  
29572

Telephone: (843) 424-2066

Fax:

Other:

Email:

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other paper as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Application - Class C Taxi  | <input type="checkbox"/> Request to Amend Scope of Authority           |
| <input type="checkbox"/> Application - Class C Charter  | <input type="checkbox"/> Request to Amend Tariff (rate increase, etc.) |
| <input type="checkbox"/> Application - Class C Charter Bus  | <input type="checkbox"/> Request to Amend Passenger Limit              |
| <input type="checkbox"/> Application - Class C Non-Emergency  | <input type="checkbox"/> Request                                       |
| <input type="checkbox"/> Application - Class E Household Goods  | <input type="checkbox"/> Exhibit                                       |
| <input type="checkbox"/> Application - Class E Hazardous Waste  | <input type="checkbox"/> Late-Filed Exhibit                            |
| <input type="checkbox"/> Application  | <input type="checkbox"/> Letter  |
| <input type="checkbox"/> Request for Extension to Comply with Order   | <input type="checkbox"/> Proposed Order                                |
| <input type="checkbox"/> Request for Order Granting Authority to Obtain Certificate of Public Convenience and Necessity to Be Rescinded | <input type="checkbox"/> Publisher's Affidavit                         |
| <input type="checkbox"/> Request for Cancellation of Certificate  | <input type="checkbox"/> Reservation Letter                            |
| <input type="checkbox"/> Request for Suspension   | <input type="checkbox"/> Response                                      |
| <input type="checkbox"/> Request for Reinstatement  | <input type="checkbox"/> Return to Petition                            |
| <input type="checkbox"/> Request for Name Change on Certificate   | <input type="checkbox"/> Other:  |

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA  
ATTN: DOCKETING DEPARTMENT  
101 EXECUTIVE CENTER DRIVE  
COLUMBIA, SOUTH CAROLINA 29210  
(Mailing address: Post Office Box 11649, Columbia, SC 29211)  
Office # (803) 896-5100 - Fax # (803-896-5199)

CLASS C - TAXI

DATE \_\_\_\_\_, 20\_\_\_\_

**APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND  
NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER**

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

Romeo Iriani dba  
Myrtle Beach Transportation

2. (a) Street Address of Applicant 511 63<sup>rd</sup> AVE N.

Myrtle Beach, SC 29572

- (b) Mailing address, if different from street address \_\_\_\_\_

Same as above

- (c) Telephone Number (843) 424-2066 Fed. ID # 043-90-3133

3. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of S.C., need S.C. Secretary of State "Foreign Corporation" Certificate.)

4. (a) If a partnership, names and addresses of all persons having an interest in the business. (b) If a corporation, names and addresses of two principal officers will be sufficient.

5. The proposed service to be provided and the proposed rates and charges for such service, per Exhibit "C" included herewith.

6. The proposed list of equipment is as per Exhibit "D" included herewith.

7. Applicant is financially able to furnish the services as specified in this Application and submits the following statement of assets and liabilities.

**BALANCE SHEET**

Balance at Time Application is Filed:  
Month: \_\_\_\_\_ Year: \_\_\_\_\_

<b>Assets:</b>	
Cash	
Receivables	1,500.00
Real Estate	
Buildings and Equipment-Net	
Motor Vehicles-Net	
Garage Equipment-Net	
Machinery and Tools-Net	
Supplies on Hand	
Prepays and Other Assets	
Total Assets	1,500.
<b>Liabilities and Equity:</b>	
Accounts Payable	
Notes Payable	
Mortgages Payable	
Equipment Obligations	
Accrued Salaries and Wages	
Other Accrued Obligations	
Other Liabilities	
Total Liabilities	
Capital Stock	
Retained Earnings	
Total Equity	
Total Liabilities and Equity	1,500.

8. Applicant is familiar with the provision of S.C. Code Ann., §58-23-10, et seq. (1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol. 23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOUTH CAROLINA,

COUNTY OF Horry

I, Romeo S. Soriane (Name of Applicant's Representative) owner (Title)

of Myrtle Beach, the Applicant for the Certificate of Public (Applicant)  
Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above Application are true and correct.

SWORN TO BEFORE ME

At Myrtle Beach

This the 27 day of March 2008

[Signature]  
(Notary Public)

[Signature]  
(Signature of Applicant's Representative)

Commission Expires: 9/12/15

EXHIBIT C

CLASS C

TAXI ☒

CHARTER ☐

**PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA**

Columbia, South Carolina

Applicant Myrtle Beach Transportation

For the transportation of passengers as follows:

Area to be served: undecided

Number of passengers: 7

Fares: \$ 2.40 per mile

Date 3/27/08

Lowes Miani

By

owner

Title

Rev.10/03

**PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA**  
**DESCRIPTION OF EQUIPMENT**

[illegible]

\* Seats if passenger carrier.

Date: 3/27/08

Myrtle Beach Transportation  
(Applicant)

James Franks  
(Applicant's Representative)

owner  
(Title)

## INSURANCE QUOTE

The following insurance quote is for:

Myrtle Beach Transportation  
(Name of Motor Carrier)

511 63<sup>rd</sup> Ave N., Myrtle Beach, SC 29572  
(Address of Motor Carrier)

### Amount of Premium:

Liability Insurance 3,544.00

The above quoted premium is for a term of 12 months.

### **Minimum Limits - Intrastate Only:**

1 - 7 passengers	-	25,000/50,000/25,000
8 - 15 passengers	-	25,000/100,000/25,000

Wataway  
(Insurance Company Name)

P.O. Box 20038, St. Louis, MO 63144  
(Home Office Address of Company)

is familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

3/27/08      [Signature]  
Date      (Authorized Insurance Company Representative)

Rev 5/07

## Schmieding, Janice

---

**From:** JoLynn Gulledge [graingercompaniesinc@sc.rr.com]  
**Sent:** Thursday, March 27, 2008 3:59 PM  
**To:** Schmieding, Janice  
**Subject:** MYRTLE BEACH TRANSPORTATION

PLEASE CORRECT NAME TO READ:

ROMEO LIRIANI  
DBA: MYRTLE BEACH TRANSPORTATION